APPLICATION FOR EXTRACURRICULAR SUPPORT FOR YOUTH (EASY)

The goal of EASY is to provide financial aid to any student that needs it to participate in extracurricular activities. This provides students with opportunities to grow socially, educationally, physically, and emotionally. These activities will help students develop skills of leadership, teamwork, sportsmanship, and character. Eligibility is based on qualification for free or reduced lunches. If you have a special hardship circumstance, please explain below what that is.

1. Student name you are applying for:		Grade:
2. Head of household name:	Phone Number:	
3. Primary living address:		
4. Additional members residing in your home & their relation	onship to you:	// /
5. Alternate contact person, relationship to you & their phor	ne number:	
6. Eligible for free or reduced lunch? Circle: YES / NO		nber 8)
7. Please list income BEFORE deductions based upon how (Income will be rounded up to the whole dollar)	often you are paid.	
Annual: Monthly: Twice per month: Will be divided by 1 Will be divided by 12 Will be divided by 24	Every 2 weeks: Will be divided by 26	Weekly: Will be divided by 52
8. Signature*: (* Signature above authorizes members of the EASY Cor Riverbend School District for verification purposes.)	Date: nmittee to share informo	ntion on this form with
9. Return to: RBEF (EASY), 1110 3 rd St., Fulton, IL 61252	2	
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FOR OFFICE USE ONLY:		
Amount approved:		
Amount set aside:Approved by:	-	
Date Application received:	-	
Denied by:	eason:	